

Knee Arthroscopy Post-Operative Instructions

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1. Ice

Ice can help decrease pain and swelling after your surgery. You can place a bag of ice wrapped in a bath towel, or any other ice wrap you may have, over the surgical area for 15-30 minutes at a time. You should use ice around the surgical site at least four times per day. If you notice that this is too cold to tolerate for extended periods then it is ok to take a break.

2. Pain Medications

You will be prescribed multiple medications to help with pain management after surgery. Below is a list of a typical post-operative pain protocol.

- Ultram (Tramadol): Take 1-2 pills every 8 hours (3 times daily). This is a moderate-strength narcotic pain medication.
- Norco (Hydrocodone-Acetaminophen): Take 1-2 pills every 4-6 hours as needed. This is a strong narcotic pain medicine with Tylenol added, and these pills are meant for pain relief after surgery. You should avoid driving while you take narcotics. DO NOT take additional Tylenol while taking this medication.
- Mobic (Meloxicam): Take once daily for 30-60 days as prescribed. This is an antiinflammatory medication that some patients are given after surgery. It helps decrease pain and inflammation.

3. Blood Thinners

You will be placed on a blood thinner after surgery to decrease the risk of blood clots associated with surgery. If you do not have a history of blood clots or bleeding disorders then you will be prescribed 81mg of Aspirin to be taken twice daily for 35 days after surgery. Some patients who have medical problems that prevent them from being able to take aspirin, or those who have a history of blood clots may be prescribed a different blood thinner, such as Xarelto or Lovenox.



4. Nausea

Pain medication can cause nausea. A prescription for nausea medication, either Phenergan or Zofran, will be provided to be taken as needed.

5. Swelling and Bruising

Swelling and bruising are normal after surgery. Your thigh, knee, calf, ankle, and foot will swell after surgery and it may take several months for swelling to completely resolve. Most swelling will resolve somewhat with rest, ice, and elevation. If you experience swelling that does not go down despite rest, ice, and elevation over a period of 36-48 hours, please call Dr. Matthews's office to have the swelling evaluated. Bruising varies in severity from patient to patient and is typically noted on the thigh and then later in the calf and/or ankle. While not all patients develop bruising after surgery, it can be severe in some patients and that is normal.

6. Constipation

Narcotic pain medication taken after surgery causes constipation. To help alleviate constipation, adhere to the following protocol until your bowel habits normalize:

- Stay well hydrated. Drink lots of water and electrolytes. Gatorade or other types of hydrating drinks can be very helpful.
- Stool softeners such as Colace or Senokot will be prescribed and these can greatly help with constipation. They are also available over the counter.
- Milk of Magnesia may be taken once or twice a day and is available over the counter.

7. Surgical Dressing

- It is normal to see a small amount of drainage from your incision on the dressing. If there is some spotting it is okay to leave the dressing in place, and you may consider reinforcing the dressing. If the dressing becomes saturated please contact Dr. Matthews.
- If your dressing feels too tight, you may loosen it. You may remove your dressing on post op day 3 and then apply waterproof Band-Aids.



8. Showering

You may shower on post op day 2 by placing a waterproof bag over your leg. Do not allow the initial dressing to get wet. Do not soak the incisions.

9. Home Exercises

Walking is a great way to exercise after surgery. There is a sheet of exercises attached that should be done as well. Outpatient physical therapy is very important for your recovery and will be arranged to start 3 to 5 days post-op.

10. Driving

To drive after surgery, you need to be able to control your vehicle and react to normal driving conditions, and you should no longer be taking narcotic pain medication as these can cause drowsiness. Some patients are ready to drive within a week or two after surgery while others need longer. You should wait to drive until cleared to do so.

11. Fevers

Low-grade fevers (less than 101 degrees Fahrenheit) are common after surgery and generally last only a short period of time. These fevers are most often caused by mucus in your lungs. Deep breaths, coughing, and walking around can be helpful for resolving these low-grade fevers. If you have a fever greater than 101 or a fever that persists despite these measures, you should call Dr. Matthews's office.

12. Call Dr. Matthews's office (757-827-2480) if you notice the following:

- Pain that is increasing every hour despite the pain medication.
- Drainage from the wound that begins more than 5 days after surgery.
- Increasing redness around the surgical site that is not resolving.
- Fever greater than 101.5 degrees that lasts longer than one day.
- Inability to keep food or water down for longer than one day.
- If you experience any emergent problems such as chest tightness, difficulty breathing or inability to swallow, etc, call 911 immediately.